NOTIFICATION OF DEMOLITION AND RENOVATION

			10 11011	01/11/0	1.4			
I. FACILITY INFORMATION (Identify owner, remova	l contr	actor, and othe	r operato	or)				
OWNER:		rcpi landma	rk prope	rties IIc				
Address:	45 rockefeller plaza							
City: ny S	state:	ny		Zip:		10111		
Contact: mathew cledaras			Telepho	one:			2125888657	
REMOVAL CONTRACTOR:	lorthst	ar Contracting G	roup Inc					
Address: 32 Williams Parkway								
City: East Hanover	tate:	NJ		Zip:	07936			
Contact: Paul Mast			Telepho	one:	(973) 77	2-3660		
OTHER OPERATOR:								
Address:								
City:	tate:			Zip:				
Contact:								
II. TYPE OF NOTIFICATION (O-Original / R-Revised):					R			
III. TYPE OF OPERATION (D-Demolition / R-Renovation	on):				1	R		
IV. IS ASBESTOS PRESENT? (yes/no):				YES				
V. FACILITY DESCRIPTION (Include building name,	numbe	er and floor or re	oom num	ber):		- 4,5		
Bldg Name:			efeller pl					
Address:	45 rockefeller plaza							
City: ny S	tate:	ny		County:		manhattar	1	
Site Location	sub b	asement store r	m. conce		rooms	77707777	•	
Building Size Sq.Meter: S	q.Ft.	787763818413	# of Flo			Age in Years:	60	
Present Use: commercial		Prior Use: commercial				00		
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD	. IF AF		SED TO I	DETECT T		101 0141		
PRESENCE OF ASBESTOS MATERIAL:								
Materials assumed to be asbestos determined b	v PLM	analysis by clie	nt.					
	,	,,						
VII. APPROXIMATE AMOUNT OF RACM TO BE REMOVE	/FD AI	ND NONERIARI	F AREST	OS MATE	PIAI	- VANC		
THAT WILL NOT BE REMOVED. SPECIFY THE AM					MAL			
THE AM	00111	OI AUDEUTOU	DLLOW.					
					Manfria	bla Asbastas		
	Nonfriable Asbestos Material Not to Be Removed							
		RACM To			Materia	I NOT TO BE KEI	novea	
				0-1			••	
Pipes - Linear Feet		Be Removed		Category	/1	Categ	ory II	
		320 LF						
Pipes - Linear Meters		Tent.			·			
Surface Area - Square Feet	***		-				11-759-12-2	
Surface Area - Square Meters								
Volume RACM off Facility Component - Cubic Feet					*****		**************************************	
Volume RACM off Facility Component - Cubic Meter			-	-			10 (0 m t 10 m t	
VIII. SCHEDULED DATES OF ASBESTOS REMOVAL (N			Start:	04/2	25/16	Completion:	12/30/16	
IX. SCHEDULED DATES OF DEMO/RENOVATION (MM	//DD/Y	Y)	Start:			Completion:		

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Figure 1. Notification of Demolition and Renovation

NOTIFICATION OF DEMOLITION AND RENOVATION (continued) DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED: asbestos abatement following nycdep regulations and variances XI. DESCRIPTION OF ENGINEERING CONTROLS AND WORK PRACTICES TO BE USED TO CONTROL EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: negative pressure containments wet methods decon units, airless sprayers. Following nycdep regulations XII. WASTE TRANSPORTER #1 Name: Vandan disposal Address: 1009 gen cove ave City: glen cove State: Ny Zip: 11545 **Contact Person:** Telephone #: 718 991 2828 **WASTE TRANSPORTER #2** Name: Address: City: State: Zip: 07 Contact Person: Telephone #: XIII. WASTE DISPOSAL SITE Name: minerva landfill Address: 8955 minerva rd City: waynesburg State: Zip: ohio 44688 Telephone: 3308663435 XIV. IF DEMOLITION ORDERED BY GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW: Name: Title: **Authority:** Date of Order (MM/DD/YY): Date Ordered to Begin (MM/DD/YY): XV. FOR EMERGENCY RENOVATION Date and Hour of Emergency (MM/DD/YY): Description of the Sudden, Unexpected Event: Explanation of How the Event Caused Unsafe Conditions or Serious Disruption of Industrial Operations: XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIALBE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER. Stop work, regulate area, institute proper engineering controls, wet materials and double bag. XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation) 04/21/16 Signature of Owner/Operator Date XVIII. I CERTIFY THAT THE ABOVE INFORMATION AS CORRECT. 04/21/16 Signature of Owner/Operator Date

Figure 1. Notification of Demolition and Renovation